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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH CAROLINA	<u></u>	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Eugene Middle name Anderson Last name and Suffix (Sr., Jr., II, III)	Kelli First name S. Middle name Anderson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6347	xxx-xx-8802

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Debtor 1 Scottie Eugene Anderson Kelli S. Anderson

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
Where you live	7 Lombardi Ct.	If Debtor 2 lives at a different address:		
	Orangeburg, SC 29118 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Orangeburg County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s)		

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	otor 1 otor 2	Scottie Eugene Ar Kelli S. Anderson	nderson		Document		Case numbe	er (if known)	
Par	t 2:	Tell the Court About	Your Bankı	ruptcy Ca	ase				
7.	Bank	chapter of the cruptcy Code you are			orief description of each, so go to the top of page 1 ar			342(b) for Individuals Filir	ng for Bankruptcy
	choc	sing to file under	☐ Chapt	er 7					
			☐ Chapt	er 11					
			☐ Chapt	er 12					
			■ Chapt	er 13					
8.	How	you will pay the fee	abo orde a pi	out how your er. If your re-printed red to pay	e entire fee when I file my ou may pay. Typically, if yo attorney is submitting you address. y the fee in installments. be in Installments (Official I	u are paying the fer r payment on your l	e yourself, you m behalf, your attor	nay pay with cash, cashie ney may pay with a cred	er's check, or money it card or check with
			☐ I re but app	quest that is not requires to you	at my fee be waived (You uired to, waive your fee, a ur family size and you are on to Have the Chapter 7 In	may request this or nd may do so only i unable to pay the fe	if your income is ee in installments	less than 150% of the of s). If you choose this opti	ficial poverty line that on, you must fill out
9. Have you filed for bankruptcy within the									
		B years?	☐ Yes.						
				District		When		Case number	
				District		When		Case number	
				District		When		Case number	
10	A == 0	any hanksyntay							
10.	case	any bankruptcy s pending or being	■ No						
	not f you,	by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.						
				Debtor				Relationship to you	
				District		When		Case number, if known	
				Debtor	-			Relationship to you	-
				District		When		Case number, if known	
11.	Do y	ou rent your	■ No.	Go to I	ine 12.				
		lence?		Has w	our landlord obtained an ev	viction judament ag	ainst you and do	you want to stay in your	residence?
			☐ Yes.		No. Go to line 12.	iodon judginent age	anist you and do	you want to stay in your	1001001100:
					Yes. Fill out <i>Initial Staten</i> bankruptcy petition.	ent About an Evicti	ion Judgment Ag	ainst You (Form 101A) a	nd file it with this

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Deb	otor 2 Kelli S. Anderson		Case number (if known)
Par	Penort About Any Ru	ıcinaccac	You Own as a Sole Proprietor
		1311163363	Tou Own as a Sole i Tophetol
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.
		☐ Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
	·		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(53A))
			Commodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of the above
40	A	16	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate it. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure C. 1116(1)(B).
	For a definition of small	■ No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have An	Hazardous Property or Any Property That Needs Immediate Attention
1/	Do you own or have any		
17.	property that poses or is	■ No.	
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?
	identifiable hazard to		
	public health or safety? Or do you own any		
	property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property? Number, Street, City, State & Zip Code
			Number, Street, Oity, State & Zip Code

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Debtor 1 Scottie Eugene Anderson
Debtor 2 Kelli S. Anderson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15.	Tell the court whether
	you have received a
	briefing about credit
	counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-05522-dd Doc 1 Filed 11/03/17 Entered 11/03/17 14:45:19 Desc Main Document Page 6 of 61

	otor 1 Scottie Eugene Al Kelli S. Anderson	nderson			Case number	(if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurs individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe t	hat are not consu	mer debts or business	debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available	ou estimate that a ble to distribute to	fter any exempt proper unsecured creditors?	ty is excluded and administrative expenses		
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		□ 5001-10,00 □ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000		
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	J00	□ More than 100,000		
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001 - \$100,000 ■ \$400,004 - \$500,000		□ \$10,000,00	1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$		□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	\$50,001 - \$100,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
		— \$100,001 \$000,000			01 - \$500 million	☐ More than \$50 billion		
Par	t7: Sign Below							
For	you	I have ex	kamined this petition, and I declare	under penalty of	perjury that the informa	ation provided is true and correct.		
			chosen to file under Chapter 7, I at tates Code. I understand the relief			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.		
			attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ment, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the chap	ter of title 11, Unit	ed States Code, specif	ied in this petition.		
			tcy case can result in fines up to \$2			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Scot	ttie Eugene Anderson		/s/ Kelli S. Anders			
			Eugene Anderson e of Debtor 1		Kelli S. Anderson Signature of Debtor 2			
		Executed	d on November 3, 2017		Executed on Nove	ember 3, 2017		
			MM / DD / YYYY		MM /	DD / YYYY		

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Debtor 1 Debtor 2	Scottie Eugene A Kelli S. Anderson		nt Pa	ge 7 of 61 Cas	e number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in under Chapter 7, 11, 12, or 13 of title 11 for which the person is eligible. I also or	, United Sta	tes Code, and have e	xplained the relief a	vailable under each chapter
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) a schedules filed with the petition is incorr	pplies, certi			
		/s/ Paul W Owen Jr		Date	November 3, 2	2017
		Signature of Attorney for Debtor			MM / DD / YYYY	
		Paul W Owen Jr				
		Printed name				
		Paul W. Owen, Jr.				
		Firm name				
		PO Box 369				
		Orangeburg, SC 29116-0369				
		Number, Street, City, State & ZIP Code				

Email address

Contact phone

Fed ID No.: 5753
Bar number & State

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		Docum	ent Page 8 of 6	1	
Fill in this inform	nation to identify your	case:			
Debtor 1	Scottie Eugene A	nderson			
	First Name	Middle Name	Last Name		
Debtor 2	Kelli S. Anderson	l			
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number					☐ Check if this is an amended filing
Official Fo	rm 106Sum				, and the second

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		169,000.00 43,900.00 212,900.00 abilities at you owe
1c. Copy line 63, Total of all property on Schedule A/B	\$ Your like	212,900.00
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your li	abilities
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Amoun	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Amoun	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	
		131,063.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	9,062.0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	83,752.62
Your total liabilities	\$	223,877.64
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,842.13
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,563.0
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	hedules.
■ W		
4	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13?	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Scottie Eugene Anderson Debtor 2 Kelli S. Anderson

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,832.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port 4 on Out of the E/F compatible fallowing.	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	9,062.02
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,062.02

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-111	in this informa	ation to identify your	case and th			400 10 01 01				
Deb	otor 1	Scottie Eugene A		e Name	L	ast Name				
	otor 2 use, if filing)	Kelli S. Anderson		e Name	L	ast Name				
Jnit	ed States Bank	cruptcy Court for the:	DISTRICT	OF SOU	ITH CAROLINA					
Cas	e number									Check if this is an amended filing
Off	ficial Form	m 106A/B								
3 c	hedule	A/B: Prop	erty							12/15
nink Ifori	it fits best. Be a mation. If more s ver every question	parately list and describe as complete and accurate space is needed, attach on. ach Residence, Building	te as possibl a separate sh	le. If two r heet to th	married people a is form. On the t	re filing together, both op of any additional pa	are equally resp	onsible for su	ıpplyi	ing correct
		<u>-</u>	· ·				<u> </u>			
_		ve any legal or equitable	interest in a	any reside	ence, building, la	nd, or similar property	ſ			
_	No. Go to Part 2									
•	Yes. Where is the	he property?								
1.1				What i	is the property?	Check all that apply				
Street address, if available, or other description			Dupley or multi-unit building the amount		the amount	deduct secured claims or exemptions. Put unt of any secured claims on Schedule D: is Who Have Claims Secured by Property.				
	City	State Z	 ZIP Code		Manufactured or Land		Current va entire prop			rrent value of the rtion you own? \$169,000.00
	City	State 2	ZIP Code	U U Who h	Timeshare Other as an interest in	the property? Check one	Describe the descr	ne nature of y		ownership interest by the entireties, or
					Debtor 1 only		Joint ter	ant		
					Debtor 2 only					
	County					e debtors and another	(see ins	if this is con tructions)	nmun	ity property
					information you rty identification	wish to add about this number:	item, such as lo	cal		
				7 Lo	z, 2BA Home ombardi Ct. ngeburg, SC 2	on 1.25 acre lot				
				3.41						

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......

\$169,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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or 2 Kelli S. Anderson		Case number (if known)	
rs, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
No			
Yes			
Make:	Who has an interest in the property? Check one	the amount of any secure	d claims on Schedule D:
	_ '		
	<u> </u>		Current value of the portion you own?
Other information:		cimo piopoliy.	po
1998 Ford Expedition 162.000	— 7 th loads one of the design and another		
miles	☐ Check if this is community property (see instructions)	\$1,200.00	\$1,200.00
Make:	Who has an interest in the property? Check one		
Model:	Debtor 1 only		
Year:	☐ Debtor 2 only	Current value of the	Current value of the
Approximate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:	☐ At least one of the debtors and another		
2005 Chevrolet Suburban 178,000 miles	Check if this is community property (see instructions)	\$4,900.00	\$4,900.00
Make:	Who has an interest in the property? Check one		
Model:	Debtor 1 only		
Year:	☐ Debtor 2 only	Current value of the	Current value of the
Approximate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:	☐ At least one of the debtors and another		
2 - four wheelers 2000 Yamaha 250 2005 Polaris 90	Check if this is community property (see instructions)	\$500.00	\$500.00
neither is running			
Make:	Who has an interest in the property? Check one	the amount of any secure	d claims on Schedule D:
Model:	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
Year:	Debtor 2 only	Current value of the	Current value of the
Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	At least one of the debtors and another		
1998 Transcraft Flatbed Trailer	☐ Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
Make:	Who has an interest in the property? Check one		
Model:	Debtor 1 only		
Year:	Debtor 2 only	Current value of the	Current value of the
Approximate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:	\square At least one of the debtors and another		
2006 Freightliner Columbia Class 983,000 miles	Check if this is community property (see instructions)	\$20,000.00	\$20,000.00
	rs, vans, trucks, tractors, sport utility vers Make: Model: Year: Approximate mileage: Other information: 1998 Ford Expedition 162,000 miles Make: Model: Year: Approximate mileage: Other information: 2005 Chevrolet Suburban 178,000 miles Make: Model: Year: Approximate mileage: Other information: 2 - four wheelers 2000 Yamaha 250 2005 Polaris 90 neither is running Make: Model: Year: Approximate mileage: Other information: 1998 Transcraft Flatbed Trailer Make: Model: Year: Approximate mileage: Other information: 1998 Transcraft Flatbed Trailer	Make: Who has an interest in the property? Check one Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor	Case number (if known) Case number (if known)

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1 Debtor 2	Scottie Eugene Anderson Kelli S. Anderson	Ca	se number (if known)	
3.6 Mak		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Yea		Debtor 2 only		
	roximate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	er information:	☐ At least one of the debtors and another	chare property:	portion you own.
	1 Fruehoff flatbed	At least one of the deptors and another		
		☐ Check if this is community property (see instructions)	\$5,000.00	\$5,000.00
		nd other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle ad		
		wn for all of your entries from Part 2, including an that number here		\$34,100.00
	escribe Your Personal and Household			
Do you ov	wn or have any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ Yes.	Describe Household god	ods, appliances and consumer electronics		\$4,000.0
■ No		deo, stereo, and digital equipment; computers, printer media players, games	s, scanners; music collect	ons; electronic devices
Exampi —	ibles of value les: Antiques and figurines; paintings other collections, memorabilia, c	, prints, or other artwork; books, pictures, or other art ollectibles	objects; stamp, coin, or ba	seball card collections;
■ No □ Yes.	Describe			
Example No	nent for sports and hobbies les: Sports, photographic, exercise, a musical instruments Describe	and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and ka	ayaks; carpentry tools;
	Savage Rifle .2			
	20 ga. shotgur 12 ga. shotgur .22 pistol Rem	l		\$800.0
10. Firearr <i>Exam</i> j ■ No	ms <i>ples:</i> Pistols, rifles, shotguns, ammur	nition, and related equipment		

Schedule A/B: Property

☐ Yes. Describe..... Official Form 106A/B

Entered 11/03/17 14:45:19 Case 17-05522-dd Doc 1 Filed 11/03/17 Page 13 of 61 Document Debtor 1 **Scottie Eugene Anderson** Debtor 2 Kelli S. Anderson Case number (if known) 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$500.00 Man and woman's wardrobe 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... man and woman's Rolex watches, engagement ring and wedding \$2,150,00 bands, costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7,450.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Checking Account South State Bank** \$50.00 17.1. **Checking account (Business)** First Citizens Bank \$2,000.00

Official Form 106A/B Schedule A/B: Property page 4

First Citizens Bank

17.2.

17.3.

\$300.00

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	btor 1 btor 2	Scottie Eugene Anderson Kelli S. Anderson		Case number (if known)	
	Examp	, mutual funds, or publicly traded stoo bles: Bond funds, investment accounts w		ney market accounts	
	■ No □ Yes	Institution or is	ssuer name:		
9.		ublicly traded stock and interests in ir	ncorporated and uninco	orporated businesses, including an interest in an LL0	C, partnership, and
	No				
	□ res.	Give specific information about them Name of entity:		% of ownership:	
	Negoti	nment and corporate bonds and other iable instruments include personal check egotiable instruments are those you can	s, cashiers' checks, pror	missory notes, and money orders.	
	□ Yes.	Give specific information about them Issuer name:			
	Examp	ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 40	1(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing plans	
	■ No □ Yes.	List each account separately. Type of account:	Institution n	name:	
22.	Your s	ty deposits and prepayments share of all unused deposits you have ma coles: Agreements with landlords, prepaid		tinue service or use from a company ctric, gas, water), telecommunications companies, or other	ers
	■ No		Institution n	name or individual:	
	■ No	ies (A contract for a periodic payment of	i money to you, either for	rille of for a number of years)	
	☐ Yes	Issuer name and descript	tion.		
		ts in an education IRA, in an account C. §§ 530(b)(1), 529A(b), and 529(b)(1).		ogram, or under a qualified state tuition program.	
	■ No □ Yes	Institution name and desc	cription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
	Trusts	, equitable or future interests in prope	erty (other than anythin	g listed in line 1), and rights or powers exercisable fo	or your benefit
	☐ Yes.	Give specific information about them			
	Examp	s, copyrights, trademarks, trade secre oles: Internet domain names, websites, p			
	■ No □ Yes.	Give specific information about them			
		es, franchises, and other general inta poles: Building permits, exclusive licenses		n holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them			
Mc	oney or	property owed to you?		porti Do no	ent value of the on you own? ot deduct secured as or exemptions.
28.	Tax ref	funds owed to you			
	No				

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 5

Entered 11/03/17 14:45:19 Desc Main Filed 11/03/17 Case 17-05522-dd Doc 1 Page 15 of 61 Document Debtor 1 **Scottie Eugene Anderson** Kelli S. Anderson Debtor 2 Case number (if known) 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,350.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Part 7:

☐ Yes. Go to line 47.

Describe All Property You Own or Have an Interest in That You Did Not List Above

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1 Debtor 2	Scottie Eugene Anderson Kelli S. Anderson	3.9	Case number (if known)	
Debtor 2	Nelli S. Aliuei Suli			
•	ou have other property of any kind you did not already list? mples: Season tickets, country club membership			
■ No				
☐ Yes	s. Give specific information			
54. Add	d the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
Part 6:	List the Totals of Each Part of this Porni			
55. Par	t 1: Total real estate, line 2			\$169,000.00
56. Par	t 2: Total vehicles, line 5	\$34,100.00		
57. Par	t 3: Total personal and household items, line 15	\$7,450.00		
58. Par	t 4: Total financial assets, line 36	\$2,350.00		
59. Par	t 5: Total business-related property, line 45	\$0.00		
60. Par	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	t 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	al personal property. Add lines 56 through 61	\$43,900.00	Copy personal property total	\$43,900.00
63. Tot a	al of all property on Schedule A/B. Add line 55 + line 62			\$212 900 00

Official Form 106A/B Schedule A/B: Property page 7

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		Docume	THE T GGC TT OF GT	
Fill in this infor	mation to identify your	case:		
Debtor 1	Scottie Eugene A	Inderson		
	First Name	Middle Name	Last Name	
Debtor 2	Kelli S. Andersor	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA	
Case number				
(if known)		 -		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
3 BR, 2BA Home on 1.25 acre lot 7 Lombardi Ct.	\$169,000.00		\$51,383.00	S.C. Code Ann. § 15-41-30(A)(1)
Orangeburg, SC 29118 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	ι σου _γ (υ)
1998 Ford Expedition 162,000 miles	\$1,200.00		\$1,200.00	S.C. Code Ann. § 15-41-30(A)(7) unused home
Ellie Holli osiloddio 702. GT			100% of fair market value, up to any applicable statutory limit	equity
2005 Chevrolet Suburban 178,000 miles	\$4,900.00		\$4,900.00	S.C. Code Ann. § 15-41-30(A)(2)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	(), /
2 - four wheelers 2000 Yamaha 250 2005 Polaris 90	\$500.00		\$500.00	S.C. Code Ann. § 15-41-30(A)(7) unused home
neither is running Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	equity
1998 Transcraft Flatbed Trailer Line from Schedule A/B: 3.4	\$2,500.00		\$750.00	S.C. Code Ann. § 15-41-30(A)(6)
Ellic Holli Golleddio FVD. 9.4			100% of fair market value, up to any applicable statutory limit	10 41 00(1)(0)

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Scottie Eugene Anderson Debtor 1 Kelli S. Anderson Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2006 Freightliner Columbia Class S.C. Code Ann. § \$4,000.00 \$20,000.00 983,000 miles 15-41-30(A)(2) Line from Schedule A/B: 3.5 100% of fair market value, up to any applicable statutory limit Household goods, appliances and S.C. Code Ann. § \$4,000.00 \$4,000.00 consumer electronics 15-41-30(A)(3) Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit Savage Rifle .270 calibre S.C. Code Ann. § \$800.00 \$800.00 Remmington Rifle .308 calibre 15-41-30(A)(7) unclaimed 20 ga. shotgun 100% of fair market value, up to portion of homestead 12 ga. shotgun any applicable statutory limit exemption .22 pistol Remmington Line from Schedule A/B: 9.1 Man and woman's wardrobe S.C. Code Ann. § \$500.00 \$500.00 15-41-30(A)(3) Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit man and woman's Rolex watches, S.C. Code Ann. § \$2,150.00 \$2,150.00 engagement ring and wedding 15-41-30(A)(4) bands, costume jewelry 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit **Checking Account** S.C. Code Ann. § \$500.00 \$50.00 **South State Bank** 15-41-30(A)(7) Unclaimed Line from Schedule A/B: 17.1 100% of fair market value, up to portion of homestead any applicable statutory limit exemption First Citizens Bank S.C. Code Ann. § \$300.00 \$300.00 Line from Schedule A/B: 17.3 15-41-30(A)(7) unused homestead exemption 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

П

Yes

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			16 19 01 01		
Fill in this inform	ation to identify you	ır case:			
Debtor 1	Scottie Eugene First Name	Anderson Middle Name Last N	ame	_	
Debtor 2	Kelli S. Anderso	on			
(Spouse if, filing)	First Name	Middle Name Last N	ame	_	
United States Ban	kruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		_	
Case number					if this is an led filing
Official Form	106D				
Schedule [D: Creditors	Who Have Claims Sec	ured by Proper	ty	12/15
		If two married people are filing together, both out, number the entries, and attach it to this			
1. Do any creditors h	nave claims secured by	your property?			
☐ No. Check	this box and submit the	his form to the court with your other sched	ules. You have nothing else	to report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
		more than one secured claim, list the creditor se		Column B	Column C
		a particular claim, list the other creditors in Partical order according to the creditor's name.	2. As Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Cabelas Vi	sa	Describe the property that secures the clai	m: \$13,446.00	\$13,400.00	\$46.00
Creditor's Name		credit card			
PO Box 38	38	As of the date you file, the claim is: Check al apply.	that		
Omaha, NE	E 68103	Contingent			
	City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only			e or secured		
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
_	e debtors and another	Judgment lien from a lawsuit			
☐ Check if this cla	im relates to a	Other (including a right to offset)			
Date debt was incu	rred revolving	Last 4 digits of account number	1325		
2.2 CitiMortga	ge	Describe the property that secures the clai	m: \$60,000.00	\$169,000.00	\$0.00
Creditor's Name		3 BR, 2BA Home on 1.25 acre lot 7 Lombardi Ct.			
PO Box 94		Orangeburg, SC 29118 As of the date you file, the claim is: Check all	that		
Gaithersbu 20898-9438	•	apply.	uidi		
	City, State & Zip Code	Contingent			
Number, Street, C	City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgag car loan)	e or secured		
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
_	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla community deb		Other (including a right to offset) Mort	gage		
Date debt was incu	rred	Last 4 digits of account number			

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Debtor 1 Scottie Eugene Anders	on	Case number (if know)			
First Name Middle N	ame Last Name	_			
Debtor 2 Kelli S. Anderson					
First Name Middle N	lame Last Name				
2.3 First Citizen Bank	Describe the property that secures the claim:	\$44,617.00	\$169,000.00	\$0.00	
Creditor's Name	3 BR, 2BA Home on 1.25 acre lot 7 Lombardi Ct.				
	Orangeburg, SC 29118 As of the date you file, the claim is: Check all that				
PO Box 29 Columbia, SC 29202-0029	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or se	ecured			
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Second M	lortgage			
Date debt was incurred	Last 4 digits of account number				
2.4 SC Housing Corporation	Describe the property that secures the claim:	\$13,000.00	\$169,000.00	\$0.00	
Creditor's Name	3 BR, 2BA Home on 1.25 acre lot 7 Lombardi Ct. Orangeburg, SC 29118				
300-C Outlet Point Blvd	As of the date you file, the claim is: Check all that				
Columbia, SC 29210	apply. ☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Number, direct, dity, diate & 21p dode	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or secar loan)	ecured			
_ ′	☐ Statutory lien (such as tax lien, mechanic's lien)				
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	<u> </u>				
☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
		A404 222 22	5 1		
-	column A on this page. Write that number here:	\$131,063.00	-		
If this is the last page of your form, add Write that number here:	the donar value totals from all pages.	\$131,063.00)		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this inf	ormation to identify your case:					
Debtor 1	Scottie Eugene Anders	son				
	First Name	Middle Name	Last Name			
Debtor 2	Kelli S. Anderson					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the: DIS	TRICT OF SOUTH CARO	LINA			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Be as complete any executory of Schedule G: Ex Schedule D: Cru left. Attach the name and case Part 1: Lis 1. Do any cre No. Go Yes. 2. List all of y identify wha possible, list	e E/F: Creditors Who and accurate as possible. Use Part contracts or unexpired leases that c ecutory Contracts and Unexpired Le editors Who Have Claims Secured b Continuation Page to this page. If you number (if known). It All of Your PRIORITY Unsecure ditors have priority unsecured claim to Part 2. Your priority unsecured claims. If a c at type of claim it is. If a claim has both to the claims in alphabetical order according to the claims one creditor holds a particular	ould result in a claim. Also eases (Official Form 106G). by Property. If more space is ou have no information to red Claims ms against you? Creditor has more than one print priority and nonpriority amount or	TY claims and Part 2 filist executory contract Do not include any cremeded, copy the Pareport in a Part, do not sometime or its unsecured claim, lints, list that claim here af you have more than two	ts on Schedule A/B: Peditors with partially s t you need, fill it out, if file that Part. On the to st the creditor separate and show both priority a	Property (Official For ecured claims that a number the entries in op of any additional by for each claim. For nd nonpriority amount	m 106A/B) and on the listed in the boxes on the pages, write your each claim listed, ts. As much as
(For an exp	lanation of each type of claim, see the	instructions for this form in th	e instruction booklet.)	Total claim	Priority amount	Nonpriority
2.1 Inter	nal Revenue Service	Last 4 digits of accou	unt number	\$6,062.02	\$6,062.02	amount \$0.00
	/ Creditor's Name			Ψ0,002.02	Ψ0,002.02	Ψ0.00
	vency Unit	When was the debt in	ncurred?		-	
	Assembly Street, 6th Floor					
	mbia, SC 29201 er Street City State Zlp Code	As of the date you file	e, the claim is: Check :	all that apply		
	rred the debt? Check one.	☐ Contingent	o, and claim for official	an triat apply		
☐ Debto	r 1 only	_				
☐ Debto	•	☐ Unliquidated				
_	,	☐ Disputed				
Debtor	r 1 and Debtor 2 only	Type of PRIORITY un				
At leas	st one of the debtors and another	☐ Domestic support of	obligations			
☐ Check	if this claim is for a community de	ebt Taxes and certain	other debts you owe the	government		
Is the cla	im subject to offset?	Claims for death or	r personal injury while yo	ou were intoxicated		
■ No		Other. Specify				
☐ Yes						

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	or 2 Kelli S. Anderson	Case number (if know)				
2.2	South Carolina Dept. of Revenue	Last 4 digits of account number	\$3,000.00	\$3,000.00 \$0.00		
	Priority Creditor's Name PO Box 125	When was the debt incurred?				
	Columbia, SC 29211-0125 Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent	- Oncor an mar appry			
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	<u> </u>				
	_	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured clain	li.			
	At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts you	•			
	Is the claim subject to offset?	Claims for death or personal injury	y while you were intoxicated			
	■ No	Other. Specify				
	☐ Yes	notice				
4. Lutl	Yes. List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify what	type of claim it is. Do not list claim	s already included in Part 1. If more		
4.1	Bank of America Visa	Last 4 digits of account number		\$12,116.84		
	Nonpriority Creditor's Name PO Box 15026 Wilmington, DE 19850-5026	When was the debt incurred?	revolving			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sep	paration agreement or divorce that y	you did not		
	Is the claim subject to offset?	report as priority claims	-			
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts			
	☐ Yes	Other. Specify credit card	t			

	Scottie Eugene Anderson Kelli S. Anderson		Case number (if know)	
4.2	Belk	Last 4 digits of account number	8860	\$2,034.40
	Nonpriority Creditor's Name PO Box 965029 Orlando, FL 32896	When was the debt incurred?	revolving	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify credit card		
	Capital One	Last 4 digits of account number	5846	\$6,956.28
	Nonpriority Creditor's Name PO Box 85617 Richmond, VA 23276-0001	When was the debt incurred?	revolving	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify credit card		
	Capital One	Last 4 digits of account number	2694	\$8,479.13
	Nonpriority Creditor's Name PO Box 85617 Richmond, VA 23276-0001	When was the debt incurred?	revolving	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify credit card		

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Capital One	Last 4 digits of account number	3667	\$9,781.54				
Nonpriority Creditor's Name PO Box 85617	When was the debt incurred?	revolving					
Richmond, VA 23276-0001 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
Who incurred the debt? Check one.	7.0 0. 11.0 44.0 , 04 11.0, 11.0 0.41111	or chook an elacappi,					
☐ Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
Yes	■ Other. Specify _ credit card						
Chase Visa	Last 4 digits of account number	0893	\$2,422.89				
Nonpriority Creditor's Name PO Box 15583 Wilmington, DE 19886-1194	When was the debt incurred?	revolving					
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans						
☐ Check if this claim is for a community							
debt Is the claim subject to offset?		aration agreement or divorce that you did not					
No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts						
☐ Yes							
□ Yes	Other. Specify credit card						
Chase Visa Nonpriority Creditor's Name	Last 4 digits of account number	6434	\$27,936.51				
PO Box 15583 Wilmington, DE 19886-1194	When was the debt incurred?	revolving					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans						
☐ Check if this claim is for a community							
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
☐ Yes	Other. Specify credit card						

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Dillard National Bank	Last 4 digits of account number	1538	\$783.02				
Nonpriority Creditor's Name PO Box 52079	When was the debt incurred?	revolving					
Phoenix, AZ 85072-2079	_						
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
Debtor 1 only							
Debtor 2 only	☐ Contingent						
_	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.					
At least one of the debtors and another	Student loans	u Ciaiii.					
☐ Check if this claim is for a community debt	_	pration agreement or diverse that you did not					
ls the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts					
Yes	Other. Specify credit card						
First Citizen Bank	Last 4 digits of account number	1952	\$4,000.00				
Ionpriority Creditor's Name							
PO Box 29 Columbia, SC 29202-0029	When was the debt incurred?						
umber Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans						
☐ Check if this claim is for a community							
debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
s the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts						
No	·						
Yes	Other. Specify signature lo	oan					
HSBC Card Services	Last 4 digits of account number	2724	\$3,866.23				
Nonpriority Creditor's Name	_						
PO Box 80084 Salinas, CA 93912-0084	When was the debt incurred?	revolving					
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
No	Debts to pension or profit-sharin	ng plans, and other similar debts					
■ Yes	■ Other. Specify credit card						

JC Penney Bankruptcy Dept	Last 4 digits of account number	0141	\$847.20
Nonpriority Creditor's Name MCCBG PO Box 103126	When was the debt incurred?	revolving	
Roswell, GA 30076	- As a full a large of the discretization to		
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured c	laim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separat report as priority claims	tion agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing p	plans, and other similar debts	
Yes	Other. Specify credit card		
LCA Collections	Last 4 digits of account number		\$234.00
Nonpriority Creditor's Name PO Box 2240	When was the debt incurred?		
Burlington, NC 27216 Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured c	laim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	tion agreement or divorce that you did not	
No	Debts to pension or profit-sharing p	plans, and other similar debts	
Yes	Other. Specify Medical		
Lowes	Last 4 digits of account number	3487	\$1,176.96
Nonpriority Creditor's Name PO Box 981064	When was the debt incurred?	revolving	
El Paso, TX 79998-1064 Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
Who incurred the debt? Check one.	• ,	, , , , , , , , , , , , , , , , , , , ,	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured c	laim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separat report as priority claims	tion agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing p	plans, and other similar debts	
☐Yes	■ Other. Specify credit card		

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Debtor 1 Scottie Eugene Anderson Debtor 2 Kelli S. Anderson Case number (if know) 4.1 **Old Navy** 4828 \$562.06 Last 4 digits of account number Nonpriority Creditor's Name 7840 Russell Road When was the debt incurred? revolving Atlanta, GA 30350 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify credit card ☐ Yes 4.1 **Sears Mastercard** 4505 \$2,555.56 Last 4 digits of account number Nonpriority Creditor's Name PO Box 105486 When was the debt incurred? revolving Atlanta, GA 30348 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify credit card Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Internal Revenue Service Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims PO Box 7346 ☐ Part 2: Creditors with Nonpriority Unsecured Claims Philadelphia, PA 19101-7346 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** Domestic support obligations 6a. 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. 9,062.02 6c. Claims for death or personal injury while you were intoxicated 6c. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6d. Total Priority. Add lines 6a through 6d. 6e 9,062.02

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Debtor 1 Scottie Eugene Anderson

Debtor 2 Kelli S. Anderson Case number (if know)

				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts		\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 83,752.62
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 83,752.62

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		50001110	116 1 61610 20 01 02	
Fill in this infor	mation to identify your	case:		
Debtor 1	Scottie Eugene A	Inderson		
	First Name	Middle Name	Last Name	
Debtor 2	Kelli S. Andersor	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.4	<u> </u>		0.0.0		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		State	ZIF Code	
0	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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		Documen	t Page 30 c	of 61	
Fill in this	information to identify your c	ase:			
Debtor 1	Scottie Eugene An	derson			
D 1 / 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Kelli S. Anderson First Name	Middle Name	Last Name		
	G,				
United Star	tes Bankruptcy Court for the:	DISTRICT OF SOUTH CA	AROLINA		
Case numb (if known)	ber				☐ Check if this is an amended filing
Official	I Form 106H				
	ule H: Your Code	btors			12/15
ill it out, and cour name		oxes on the left. Attach t Answer every question.	he Additional Page t	o this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
■ No					
☐ Yes	i				
	nin the last 8 years, have you l a, California, Idaho, Louisiana, N				states and territories include
`	Go to line 3. Did your spouse, former spous	se, or legal equivalent live v	with you at the time?		
in line Form	2 again as a codebtor only if	that person is a guaranto	r or cosigner. Make	sure you have listed th	g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP	Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	e
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	
ī	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, li	
				☐ Schedule G, line	
=	Number Street			<u> </u>	

State

City

ZIP Code

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Fill in this information to	o identify your case:	
Debtor 1	Scottie Eugene Anderson	
Debtor 2 (Spouse, if filing)	Kelli S. Anderson	
United States Bankrup	tcy Court for the: DISTRICT OF SOUTH CAROLINA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
000.1.1		13 income as of the following date:
Official Form		MM / DD/ YYYY
Schedule I:	Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed,

attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation President/Owner Member services Include part-time, seasonal, or **Employer's name Edisto Carriers Orangeburg Country Club** self-employed work. **Employer's address** Occupation may include student **PO Box 1684** 2745 Griffith Sr or homemaker, if it applies. **Orangeburg, SC 29116-1684** Orangeburg, SC 29118 How long employed there? 16 years 1 year

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3.100.00 2,588.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 3,100.00 2,588.00

Official Form 106I Schedule I: Your Income page 1

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Debto		Scottie Eugene Anderson Kelli S. Anderson	_		Case	e number (<i>if ki</i>	nown)				
					Fo	r Debtor 1			Debtor -filing s		
	Cop	by line 4 here	4.		\$_	3,100	0.00	\$		588.00	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	237	7.15	\$		344.22	2
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$		0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	(0.00	\$		0.00)
	5d.	Required repayments of retirement fund loans	50	d.	\$	(0.00	\$		0.00)
	5e.	Insurance	56		\$_		0.00	\$		408.50	
	5f.	Domestic support obligations	5f		\$_		0.00	\$_		0.00	
	5g.	Union dues	50	-	\$_		0.00	\$_		0.00	
_	5h.	Other deductions. Specify:		า.+	· -		0.00			0.00	_
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_		7.15	\$_		752.72	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,862	2.85	\$_	1,	835.28	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$	1,144	1 00	\$		0.00	.
	8b.	Interest and dividends	8t		\$ \$		+.00 0.00	* *_		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_ \$		0.00	\$ \$		0.00	_
	8d.	Unemployment compensation	80		Ψ \$		0.00	· \$_		0.00	_
	8e.	Social Security	86		\$		0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		0.00	\$		0.00	
	8g.	Pension or retirement income	80		\$_		0.00	\$_		0.00	
	8h.	Other monthly income. Specify:	8r	า.+	\$_		0.00	+ 5 —		0.00	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	1,144	4.00	\$		0.0	00
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,006.85	+ \$	1 8	335.28	= \$	5,842.13
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				1,000.00		,-	700.20		0,0 12110
	Inclionation of the control of the c	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep							e J. +\$	0.00
		I the amount in the last column of line 10 to the amount in line 11. The re e that amount on the Summary of Schedules and Statistical Summary of Certallies							12.	\$	5,842.13
13.	Do :	you expect an increase or decrease within the year after you file this forn	1?						J	Comb	ined nly income
		No. Yes. Explain:									

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						_					
Fill	in this information	tion to identify yo	our case:								
Deb	Debtor 2 Kelli S. Anderson						Check if this is:				
Dob							An amended	d filing :nt showing postpetition ch	ontor		
	ouse, if filing)	Keili S. Ande	erson					s as of the following date:	iapiei		
							·				
Unit	ted States Bankr	uptcy Court for the:	DISTRI	CT OF SOUTH CAROLI	NA		MM / DD / Y	YYY			
l	se number (nown)										
O	fficial Fo	rm 106J									
S	chedule	J: Your I	Exper	nses					12/15		
Be info	as complete a ormation. If m mber (if know	and accurate as ore space is ned n). Answer ever	possible eded, atta y questio	. If two married people ich another sheet to thi				sible for supplying corre write your name and cas			
		ibe Your House	hold								
1.	Is this a join										
	□ No. Go to			ata hawaah ald0							
			n a separ	ate household?							
	■ No □ Ye		st file Offic	al Form 106J-2, <i>Expens</i>	es for Separate House	ehold of De	ebtor 2.				
2.	Do you have	e dependents?	□ No								
	Do not list De Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Depende age	ent's Does dependen live with you?	t		
	Do not state	tha						□ No			
	Do not state dependents				Daughter		14	■ Yes			
								□ No			
					Son		20	■ Yes			
								□ No			
								Pyes			
								□ No □ Yes			
3.	Do your exp	enses include		No				La res			
	expenses of	f people other th	han _	Yes							
	yourself and	d your depender	nts?	163							
Est exp	timate your ex		our bankr	uptcy filing date unless				n a Chapter 13 case to re e top of the form and fill			
the		n assistance and		government assistance cluded it on <i>Schedule I</i> :			You	ur expenses			
4.	The rental o	r home ownere	hin avner	ses for your residence	Include first mortage	_					
4.		nd any rent for the			. moldde mst mortgagi	4.	\$	1,400.00			
	If not includ	led in line 4:									
	4a. Real e	estate taxes				4a.	\$	0.00			
	•	rty, homeowner's	-			4b.	· : —	0.00			
			•	upkeep expenses		4c.		100.00			
5.		owner's associat nortgage pavme		dominium dues our residence, such as l	nome equity loans	4d. 5.	\$	0.00			
			· · · · · · · · · · · · · · · · · · ·			٥.	*	0.00			

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ebtor 1 Scottie Eugene Anderson Ebtor 2 Kelli S. Anderson		Case num	ber (if known)	
. Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	278.00
6b. Water, sewer, garbage collection		6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite	, and cable services	6c.	\$	550.00
6d. Other. Specify:		6d.	\$	0.00
Food and housekeeping supplies		7.	\$	840.00
Childcare and children's education costs		8.	\$	200.00
Clothing, laundry, and dry cleaning		9.	\$	220.00
Personal care products and services		10.	\$	0.00
Medical and dental expenses		11.	\$	120.00
Transportation. Include gas, maintenance, bu	is or train fare.	10	Ф.	300.00
Do not include car payments.		12.	·	
Entertainment, clubs, recreation, newspape	=	13.	\$	100.00
Charitable contributions and religious dona	tions	14.	\$	50.00
Insurance.	and an Cook of a disc Page 4 an OO			
Do not include insurance deducted from your p	bay or included in lines 4 or 20.	150	¢	250.00
15a. Life insurance15b. Health insurance		15a. 15b.	·	250.00
			·	0.00
15c. Vehicle insurance		15c.	·	125.00
15d. Other insurance. Specify:		15d.	>	0.00
Taxes. Do not include taxes deducted from yo Specify: Vehicle taxes	ur pay or included in lines 4 or 20.	16.	\$	30.00
Installment or lease payments:		47	•	
17a. Car payments for Vehicle 1		17a.	·	0.00
17b. Car payments for Vehicle 2		17b.	·	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	\$	0.00
Your payments of alimony, maintenance, at deducted from your pay on line 5, Schedule		18.	\$	0.00
Other payments you make to support other			\$	0.00
Specify:		19.		
Other real property expenses not included	in lines 4 or 5 of this form or on <i>Sche</i> e			
20a. Mortgages on other property		20a.	· ·	0.00
20b. Real estate taxes		20b.	·	0.00
20c. Property, homeowner's, or renter's insur		20c.	·	0.00
20d. Maintenance, repair, and upkeep expen		20d.	· · · · · · · · · · · · · · · · · · ·	0.00
20e. Homeowner's association or condominion	ım dues	20e.	\$	0.00
Other: Specify:		21.	+\$	0.00
Calculate your monthly expenses				
22a. Add lines 4 through 21.			\$	4,563.00
22b. Copy line 22 (monthly expenses for Debte	or 2), if any, from Official Form 106J-2		\$	<u> </u>
22c. Add line 22a and 22b. The result is your	monthly expenses.		\$	4,563.00
Calculate your monthly net income.				
23a. Copy line 12 (your combined monthly in	come) from Schedule I	23a.	\$	5,842.13
23b. Copy your monthly expenses from line 2		23b.	· · · · · · · · · · · · · · · · · · ·	4,563.00
23b. Copy your monthly expenses from line 2	.zc above.	230.	- Φ	4,563.00
23c. Subtract your monthly expenses from your monthly net income.	our monthly income.	23c.	\$	1,279.13
Do you expect an increase or decrease in y For example, do you expect to finish paying for your modification to the terms of your mortgage? ☐ No.	car loan within the year or do you expect your	mortgage	payment to increase	
Yes. Explain here: Debtors do I	not anticipate an increase in expe	nses du	iring the tenure	e of this bankrupte

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Fill in this inf	ormation to identify your	case:				
Debtor 1						
Depior 1	Scottie Eugene A First Name	Middle Name	Last	Name		
Debtor 2	Kelli S. Anderson					
(Spouse if, filing)	First Name	Middle Name	Last	Name		
United States	Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA			
Case number						
(if known)						Check if this is an amended filing
						Ŭ
	orm 106Dec				_	
Declara	ation About a	n Individual	Debto	or's Schedu	les	12/15
	. 18 U.S.C. §§ 152, 1341, 1 sign Below	519, and 3571.				
Did you	pay or agree to pay some	one who is NOT an attor	ney to help	you fill out bankruptcy	forms?	
■ No						
☐ Yes	. Name of person					Petition Preparer's Notice, Inature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and se	hedules filed with this	declaration and	
X /s/S	cottie Eugene Anderso	n	х	/s/ Kelli S. Anderso	n	
Scot	ttie Eugene Anderson			Kelli S. Anderson		
Signa	ature of Debtor 1			Signature of Debtor 2		
Date	November 3, 2017			Date November 3,	2017	

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Fill i	n this inforr	nation to identify you	r case:				
Debtor 1		Scottie Eugene Anderson					
		First Name	Middle Name	Last Name			
Debt		Kelli S. Anderso					
(Spou	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT OF SOUTH CA	AROLINA			
Case number					-	Check if this is an mended filing	
Sta Be as	complete a	of Financial		are filing together, both are	equally responsible for sup		
		ore space is needed, n). Answer every que		this form. On the top of any	y additional pages, write you	ır name and case	
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before			
1. \	What is you	nat is your current marital status?					
 	■ Married □ Not mai	ried					
2. I	During the I	ing the last 3 years, have you lived anywhere other than where you live now?					
 	 ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 						
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
					ity property state or territory co, Texas, Washington and W		
I	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).			
Part	2 Explai	n the Sources of You	r Income				
F	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
l I	□ No ■ Yes. Fil	in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$31,000.00	■ Wages, commissions, bonuses, tips	\$25,880.00	
			☐ Operating a business		☐ Operating a business		

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Page 37 of 61 Document Debtor 1 **Scottie Eugene Anderson** Kelli S. Anderson Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) ☐ Wages, commissions, \$11,440.00 ☐ Wages, commissions, \$0.00 bonuses, tips bonuses, tips Operating a business ☐ Operating a business For last calendar year: \$37,200.00 \$20,000.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$15,000.00 \$0.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$16,500.00 \$37,200.00 Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$14,300.00 \$0.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 17-05522-dd Doc 1 Filed 11/03/17 Entered 11/03/17 14:45:19 Desc Main Page 38 of 61 Document Debtor 1 **Scottie Eugene Anderson** Debtor 2 Kelli S. Anderson Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment Total amount Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number First Citizens Bank & Trust v. foreclosure **Common Pleas** Pending Scottie E. Anderson and Kellie S. 145 Docket St. □ On appeal Anderson Orangeburg, SC 29115 Concluded 2017-CP-38-00624 sale ordered Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.

Yes. Fill in the information below.

Creditor Name and Address Describe the Property Date Value of the property **Explain what happened**

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De	btor 2	Kelli S. Anderson		Case number	(if known)	
11.		nts or refuse to make a payment		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any	amounts from your
		es. Fill in the details.				
		or Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
12.		ppointed receiver, a custodian, o		ras any of your property in the possession of an a er official?	assignee for the ben	efit of creditors, a
	☐ Ye					
Pai	rt 5: L	ist Certain Gifts and Contributio	ns			
13.	_		ruptcy,	did you give any gifts with a total value of more th	nan \$600 per person	?
	■ No	oes. Fill in the details for each gift.				
	Gifts v per pe	vith a total value of more than \$6 rson	00	Describe the gifts	Dates you gave the gifts	Value
	Person Addre	n to Whom You Gave the Gift and ss:	t			
14.	■ No	•		did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts of more to Charit	or contributions to charities that than \$600 y's Name SS (Number, Street, City, State and ZIP Co	total	Describe what you contributed	Dates you contributed	Value
Pal	rt 6: L	ist Certain Losses				
15.		1 year before you filed for bankr	uptcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	■ No	o es. Fill in the details.				
	Descri	ibe the property you lost and ne loss occurred	Include	ibe any insurance coverage for the loss the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: L	ist Certain Payments or Transfe				
	Within consul	1 year before you filed for bankrited about seeking bankruptcy or	uptcy, d prepari	id you or anyone else acting on your behalf pay on gar bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you
	□ No	oes. Fill in the details.				
	Person Addre Email	n Who Was Paid	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		ysharp LLC		20.00	11/2/2017	\$20.00
	www.	moneysharp.org				

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Debtor 1 Scottie Eugene Anderson Debtor 2 Kelli S. Anderson

Case number (if known)

17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you No Yes. Fill in the details.	ors or to make payments			r transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details. Person Who Received Transfer	business or financial affa ade as security (such as t dy listed on this statement	irs? he granting of a se	ecurity interest		
	Address Person's relationship to you	Description and v property transferr			received or debts	made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a se	elf-settled tru	st or similar device	of which you are a
	Name of trust	Description and v	alue of the prope	erty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, In:	struments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso No Yes, Fill in the details.	or other financial accour	nts; certificates o			
	Name of Financial Institution and	Last 4 digits of	Type of accoun	t or Dat	e account was	Last balance
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	mo	sed, sold, ved, or nsferred	before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	bankruptcy, any	safe deposit	box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the o	contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	home within 1 ye	ear before yo	u filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the o	contents	Do you still have it?

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Debtor 1 Scottie Eugene Anderson
Debtor 2 Kelli S. Anderson

Case number (if known)

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Whitten you have seed and 2IP Code) Where is the property? Whitten you have seed and 2IP Code) Where is the property? Whitten you have seed and 2IP Code) Part 102 Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material means anything an environmental law remarks. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Name of site Address (humber, Street, City, State and ZIP Code) Address (humber,	Par	9: Identify Property You Hold or Control for	Someone Else		
Yes. Fill in the details. Where is the property? Value Address (Number, Street, City, State and ZIP Code) Chumber, Street, City, State and ZIP Describe the property Value Address (Number, Street, City, State and ZIP Code) Chumber, Street, City, State and ZIP Code) Chumber, Street, City, State and	23.		one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust
Owner's Name Address (Number, Street, City, State and ZIP Code) Addre		_ 110			
Address (Number, Street, City, State and ZIP Code) Code Status of the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you wnow about, regardless of when they occurred. Mo Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Stre		Yes. Fill in the details.			
For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. No			(Number, Street, City, State and ZIP	Describe the property	Value
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Stite means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, Sta	Par	Give Details About Environmental Information	ation		
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, St	For	he purpose of Part 10, the following definitions	apply:		
to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No		toxic substances, wastes, or material into the a	ir, land, soil, surface water, ground		
Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. No Yes. Fill in the details. No Yes. Fill in the details. No Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Case Title Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Numb			•	law, whether you now own, operate,	or utilize it or used
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Pos. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and				s waste, hazardous substance, toxic	substance,
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice know it	Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.	
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the Case Number, Street, City, State and ZIP Code) Nature of the case Status of the Case Number, Street, City, State and ZIP Code) Nature of the case Status of the Case Number, Street, City, State and ZIP Code) Nature of the case Number, Street, City, State and ZIP Code) Nature of the case Number, Street, City, State and ZIP Code) Nature of the case Number, Street, City, State and ZIP Co	24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time			Address (Number, Street, City, State an		Date of notice
☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ■ No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time	25.	Have you notified any governmental unit of any	release of hazardous material?		
Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Status of the case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time		_ ```			
No Yes. Fill in the details. Case Title Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time			Address (Number, Street, City, State an		Date of notice
☐ Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the case Case Number Address (Number, Street, City, State and ZIP Code) Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time	26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.
Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time		_			
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time			Name Address (Number, Street, City,	Nature of the case	
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time	Par	11: Give Details About Your Business or Con	nections to Any Business		
	27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)		☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time	
		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	
☐ A partner in a partnership		_	, , , , , , , , , , , , , , , , , , , ,	,	
☐ An officer, director, or managing executive of a corporation			tive of a corporation		
☐ An owner of at least 5% of the voting or equity securities of a corporation		<u>_</u>	-		

Case 17-05522-dd Doc 1 Filed 11/03/17 Entered 11/03/17 14:45:19 Desc Main Page 42 of 61 Document Debtor 1 **Scottie Eugene Anderson** Kelli S. Anderson Debtor 2 Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Scottie Eugene Anderson /s/ Kelli S. Anderson Kelli S. Anderson **Scottie Eugene Anderson** Signature of Debtor 2 Signature of Debtor 1 Date November 3, 2017 Date November 3, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:						
Debtor 1	Scottie Eugene Anderson					
Debtor 2 (Spouse, if filing)	Kelli S. Anderson					
United States B	ankruptcy Court for the: District of South Carolina					
Case number (if known)						

Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:							
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). 							
3. The commitment period is 3 years.							
4. The commitment period is 5 years.							
☐ Check if this is an amended filing							

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,100.00 2,588.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm 13.937.00 \$ Gross receipts (before all deductions) 12,793.00 Ordinary and necessary operating expenses Copy Net monthly income from a business. \$ 1,144.00 here -> \$ 1,144.00 0.00 profession, or farm 6. Net income from rental and other real property Debtor 1

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

\$

-\$

\$

0.00

0.00

0.00 Copy here -> \$

0.00

Gross receipts (before all deductions)

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

0.00

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Kelli S. Anderson Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 4,244.00 2,588.00 6,832.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 6,832.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 6,832.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 6.832.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 81,984.00 15b. The result is your current monthly income for the year for this part of the form.

Scottie Eugene Anderson

Debtor 1

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Kelli S. Anderson Debtor 2 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 4 75.946.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 17a. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. 6,832.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 6,832.00 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 6,832.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 81,984.00 20b. The result is your current monthly income for the year for this part of the form \$ 75,946.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Scottie Eugene Anderson X /s/ Kelli S. Anderson Scottie Eugene Anderson Kelli S. Anderson Signature of Debtor 1 Signature of Debtor 2 Date November 3, 2017 Date November 3, 2017 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Scottie Eugene Anderson

Debtor 1

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			-		
Fill in	this info	rmation to identify your case:			
Debto	or 1	Scottie Eugene Anderson			
Debto	or 2 use, if filin	Kelli S. Anderson			
Unite	d States E	Bankruptcy Court for the: District of South Carolina			
Case (if kno	number own)		☐ Check	if this is an amended fi	iling
	al Form 1 apter	<u>22C-2</u> 13 Calculation of Your Disposable I	ncome		04/1
		form, you will need your completed copy of <i>Chapter 13 Statem</i> eriod (Official Form 122C-1).	ent of Your Current Monthly	Income and Calculation	of
space	is neede	e and accurate as possible. If two married people are filing togod, attach a separate sheet to this form, Include the line numbers, write your name and case number (if known).			
Part 1	l: Ca	Iculate Your Deductions from Your Income			
the	question	Revenue Service (IRS) issues National and Local Standards for in lines 6-15. To find the IRS standards, go online using the may also be available at the bankruptcy clerk's office.			
exp	enses if	expense amounts set out in lines 6-15 regardless of your actual exp hey are higher than the standards. Do not include any operating ex I do not deduct any amounts that you subtracted from your spouse'	penses that you subtracted fro	om income in lines 5 and 6	
If y	our exper	nses differ from month to month, enter the average expense.			
No	te: Line n	umbers 1-4 are not used in this form. These numbers apply to infor	nation required by a similar fo	rm used in chapter 7 cases	S.
5.	The nu	mber of people used in determining your deductions from inco	ome		
	plus the	ne number of people who could be claimed as exemptions on your f e number of any additional dependents whom you support. This nur nber of people in your household.		4	
Na	tional Sta	Andards You must use the IRS National Standards to ans	wer the questions in lines 6-7.		
6.		clothing, and other items: Using the number of people you entererds, fill in the dollar amount for food, clothing, and other items.	d in line 5 and the IRS Nationa	al \$	1,650.00
_					

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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ebtor 1	Scottie Eugene Anderson	
	Kelli S. Anderson	Case number (if known)

ople v	who are under 65 years of age								
7a.	Out-of-pocket health care allowance per person	\$	49						
7b.	Number of people who are under 65	X	4						
7c.	Subtotal. Multiply line 7a by line 7b.	\$	196.00	Copy her	e=> 3	\$	196.00		
eople v	who are 65 years of age or older								
7d.	Out-of-pocket health care allowance per person	\$	117						
7e.	Number of people who are 65 or older	Χ	0						
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy her	e=> :	\$	0.00		
7g.	Total. Add line 7c and line 7f			\$ 196.00		Copy to	tal here=>	\$	196.00
J						.,		· -	
Hous	tcy purposes into two parts: ing and utilities - Insurance and operating expen	ises							
	ing and utilities - Mortgage or rent expenses	_	–						
	rer the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also be						tne link s	specified in	tne
pulut			abic at the b						
Hou	using and utilities - Insurance and operating expo	enses: l	Jsing the nui	mber of people you	entere	d in line	5, fill \$		668.
Hou in th	ne dollar amount listed for your county for insurance	enses: l and ope	Jsing the nui erating exper	mber of people you	entere	d in line	5, fill \$_		668.0
Hou in th	using and utilities - Insurance and operating expone dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, 1 listed for your county for mortgage or rent expenses	and ope	erating exper	mber of people you ises.			5, fill \$_ 822.00		668.0
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Hou in th Hou 9a.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor Cabelas Visa CitiMortgage First Citizen Bank SC Housing Corporation	and ope	dollar amounter debts secun nounts that a safter you fill average more ayment 2 8 6 6 13,0	nt red by your home. red by your home. re e nthly 45.00 00.00 50.00 00.00 Copy	ţ	\$	\$_ 822.00_		is amou
Hou in th Hou 9a. 9b.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, the listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at Total calculate the total average monthly payment, and contractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor Cabelas Visa CitiMortgage First Citizen Bank SC Housing Corporation	and operation and operation the estimates and other destination of the estimates and other destination and the estimates and other destination and the estimates and the estim	dollar amounter debts secun nounts that a safter you fill average more ayment 2 8 6 6 13,0	nt red by your home. red by your home. re e hthly 45.00 00.00 50.00 00.00 Copy here=>	ţ	\$	\$_ 822.00_	on line 33	is amou
Hou in the Hou 9a. 9b.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, the listed for your county for mortgage or rent expensed. Total average monthly payment for all mortgages at the total average monthly payment, and contractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor Cabelas Visa CitiMortgage First Citizen Bank SC Housing Corporation 9b. Total average monthly payment. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) for the following contracts are supported by the following contracts average monthly payment.	and operation and operation and operation and other east. and other east.	dollar amounter debts secunounts that a safter you fill average more ayment 2 8 6 13,0 14,6 9a (mortgage)	nt red by your home. re e nthly 45.00 00.00 50.00 00.00 Copy here=>	-\$_	14	822.00 6,695.00 Copy	on line 33	is amou a.

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ebtor 2	Kelli S. Anderson		Case number (if I	nown)		
11	Local transportation expenses: Check the number of vehic	cles for which you claim	an ownershin	or operating	eynense	
	□ 0. Go to line 14.	sico for willon you claim	an ownording	or operating	скропос.	
	_					
	☐ 1. Go to line 12.					
	2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for					430.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1 Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$0.00	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard			0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs fo	or			
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total average monthly payment	\$0.00	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of vehicles.				the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the a				0.00

Scottie Eugene Anderson

Debtor 1

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Debtor 1 Debtor 2 Scottie Eugene Anderson
Kelli S. Anderson Case number (if known)

		addition to the expense defollowing IRS categories		listed above,	you are allowed your monthly expenses	for	
16.	5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						0.00
	Do not include real estate, sales, or use taxes.					\$	0.00
17.	Involuntary deductions: The contributions, union dues, and		uctions tha	t your job red	quires, such as retirement		
			o, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paymer	nts that you make for your fe insurance on your depe	spouse's t	erm life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: The administrative agency, such a	s spousal or child support	payments		•	\$	0.00
					ou will list these obligations in line 35.	Ψ	
20.	Education: The total monthly	, , ,	ducation th	hat is either r	equired:		
	as a condition for your job,					•	0.00
	for your physically or menta	ally challenged dependent	child if no	public educa	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly and not include payments for a				itting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the health a by a health savings account. I	and welfare of you or your nclude only the amount th	dependen at is more	ts and that is than the tota		\$	0.00
	Payments for health insurance	_		-		Ψ	0.00
23.	for you and your dependents, phone service, to the extent no income, if it is not reimbursed	such as pagers, call waitir ecessary for your health a by your employer. asic home telephone, inte	ng, caller ic nd welfare rnet and co	dentification, or that of yo ell phone ser	you pay for telecommunication services special long distance, or business cell ur dependents or for the production of vice. Do not include self-employment punt you previously deducted.	+\$	0.00
24.	Add lines 6 through 33	wed under the IRS expe	nse allowa	ances.		\$	2,944.00
	Add all of the expenses allo Add lines 6 through 23. itional Expense Deductions	These are additional de	eductions a	allowed by th		\$	2,944.00
Add	Add lines 6 through 23. itional Expense Deductions	These are additional do	eductions a	allowed by the allowances	listed in lines 6-24.	\$	2,944.00
Add	Add lines 6 through 23. itional Expense Deductions Health insurance, disability	These are additional de Note: Do not include ar	eductions a ny expense avings acc	allowed by the allowances			2,944.00
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Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	These are additional de Note: Do not include an insurance, and health savings acco	eductions any expense avings accounts that a	allowed by the allowances count expensive reasonable 0.00	listed in lines 6-24. ses. The monthly expenses for health		0.00
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	These are additional de Note: Do not include au insurance, and health say, and health savings acco	eductions any expense avings accunts that a	allowed by the allowances count expensive reasonable 0.00 0.00 0.00	listed in lines 6-24. ses. The monthly expenses for health y necessary for yourself, your spouse, o	ır	
Add	Add lines 6 through 23. Itional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total	These are additional de Note: Do not include au insurance, and health say, and health savings acco	eductions any expense avings accunts that a	allowed by the allowances count expensive reasonable 0.00 0.00 0.00	listed in lines 6-24. ses. The monthly expenses for health y necessary for yourself, your spouse, o	ır	
Add 25.	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you yes Continued contributions to continue to pay for the reason	These are additional de Note: Do not include an insurance, and health say, and health savings according a mount? actually spend?	sylvings accounts that a	allowed by the allowances count expensive reasonable 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	cactual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may	ır	
25. 26.	Add lines 6 through 23. Itional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you yes Continued contributions to continue to pay for the reason your household or member of include contributions to an accordinate to against family vice.	These are additional di Note: Do not include ar insurance, and health sa, and health savings acco at a amount? at amount? actually spend? the care of household or able and necessary care a your immediate family whount of a qualified ABLE polence. The reasonably necessary care.	surings accumbs that a	allowed by the allowances count expense reasonable 0.00 0.00 0.00 0.00 0.00 embers. The rt of an elder et to pay for si 6 U.S.C. § 5 conthly expense	cactual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may	s	0.00

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btor 1 btor 2	Scottie Eugene Anderson Kelli S. Anderson		Cas	e number (<i>if known</i>)				
	Additional home energy costs. Your homine 8.	e energy costs are included in your	insurance	and operating	expense	s on		
I 8	f you believe that you have home energy on a, then fill in the excess amount of home er	osts that are more than the home energy costs	nergy cost	s included in ex	penses (on line		
	You must give your case trustee document amount claimed is reasonable and necessa		ou must s	how that the ad	ditional		\$	0.00
9	Education expenses for dependent chilo §160.42* per child) that you pay for your de public elementary or secondary school.							
	You must give your case trustee document claimed is reasonable and necessary and r			explain why the a	amount			
,	Subject to adjustment on 4/01/19, and ever	ry 3 years after that for cases begu	in on or af	er the date of a	djustmer	nt.	\$	0.00
ŀ	Additional food and clothing expense. Thigher than the combined food and clothing han 5% of the food and clothing allowance	allowances in the IRS National Sta						
	To find a chart showing the maximum addit nstructions for this form. This chart may als				ate			
•	You must show that the additional amount	claimed is reasonable and necessar	ry.				\$	0.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga			the form of cas	h or fina	ncial		
I	Do not include any amount more than 15%	of your gross monthly income.					\$	0.00
	Add all of the additional expense deduc	ions.					\$	0.00
,	Add lines 25 through 31.					l		
Dedu	ctions for Debt Payment							
	or debts that are secured by an interest ans, and other secured debt, fill in lines		ng home i	nortgages, veh	icle			
	ans, and other secured debt, in in ince	33a through 33e.						
	o calculate the total average monthly paymeditor in the 60 months after you file for ba	ent, add all amounts that are contra	ctually due	e to each secure	ed			
	o calculate the total average monthly paym	ent, add all amounts that are contra	ctually due	e to each secure	ed		_	monthly
cr	o calculate the total average monthly paymeditor in the 60 months after you file for ba Mortgages on your home	ent, add all amounts that are contra nkruptcy. Then divide by 60.	·				ayment	•
cr	co calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here	ent, add all amounts that are contra	·			F	ayment	_
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Scottie Eugene Anderson Debtor 1 Kelli S. Anderson Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that secures the debt Name of the creditor Total cure amount Monthly cure amount $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. ■ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 151.03 9,062.02 ÷ 60 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 14,846.03 \$ 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 2.944.00 expense allowances Copy line 32, All of the additional expense deductions 0.00 Copy line 37, All of the deductions for debt payment 14,846.03 17,790.03 17.790.03 Copy total here=> Total deductions.....

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Debtor 1 Debtor 2		tie Eugene S. Anders	e Anderson son		Case	numl	ber (<i>if known</i>)		
Part 2:	Det	ermine You	r Disposable Income Under 11 U.S.0	C. § 1325(b)(2)				
			rent monthly income from line 14 of Current Monthly Income and Calcula					\$	6,832.00
ch dis red ned	ildren. ability eived cessar	The monthle payments for in accordance to be expended.	ly necessary income you receive for ly average of any child support paymer or a dependent child, reported in Part I ce with applicable nonbankruptcy law to ended for such child.	nts, foster ca of Form 1220 o the extent	re payments, or C-1, that you reasonably	\$	0	.00	
em in '	ployer 11 U.S	withheld fro .C. § 541(b)	etirement deductions. The monthly to om wages as contributions for qualified (7) plus all required repayments of loar § 362(b)(19).	retirement p	lans, as specified	\$	0	.00	
42. To	tal of a	all deductio	ns allowed under 11 U.S.C. § 707(b)((2)(A). Copy	line 38 here=>	\$	17,790	.03	
exp the	oenses eir expe	and you ha	al circumstances. If special circumstative no reasonable alternative, describe must give your case trustee a detailed occumentation for the expenses.	the special	circumstances and	İ			
Descri	be the	special cir	cumstances		Amount of exper	nse			
				\$					
							•		
							-		
				Total \$	0.00	Co _l	py re=> \$	0.00	
44. To	tal adj	ustments.	Add lines 40 through 43.		=> \$		17,790.03	Copy here=> -\$	17,790.03
45. Ca Part 3:	Ī		thly disposable income under § 1325	5(b)(2). Subt	ract line 44 from lir	ne 39	9.	\$	-10,958.03
ha tim you	ve cha le your u filed :	nged or are case will be your petition	or expenses. If the income in Form 122 virtually certain to change after the dat e open, fill in the information below. For the check 122C-1 in the first column, entrin when the increase occurred, and fill	e you filed yo example, if er line 2 in th	our bankruptcy pet the wages reported e second column,	ition d inc	and during the creased after		
Form		Line	Reason for change		Date of change		Increase or decrease?	Amount of	change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2 C-1					_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase	\$ \$	
1 220	U-Z					_	☐ Decrease	\$	

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Debtor 2	Kelli S. Anderson	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declar	re that the information on this statement and in any attachments is true and correct.
	/s/ Scottie Eugene Anderson	X /s/ Kelli S. Anderson
	/s/ Scottie Eugene Anderson Scottie Eugene Anderson Signature of Debtor 1	X /s/ Kelli S. Anderson Kelli S. Anderson Signature of Debtor 2
-	Scottie Eugene Anderson	Kelli S. Anderson
-	Scottie Eugene Anderson Signature of Debtor 1	Kelli S. Anderson Signature of Debtor 2

Scottie Eugene Anderson

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-05522-dd Doc 1 Filed 11/03/17 Entered 11/03/17 14:45:19 Desc Main Document Page 58 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of South Carolina

In	Scottie Eugene Anderson re Kelli S. Anderson		Case No.		
	- Nom Or / Middle Coll	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rende	red or to
	For legal services, I have agreed to accept		\$	3,700.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		_	3,700.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compo	ensation with any other person	unless they are mem	bers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspect	s of the bankruptcy of	ase, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hot 	ement of affairs and plan which ors and confirmation hearing, ar educe to market value; exe ns as needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof;	g of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	e does not include the following	service: cial lien avoidanc	es, relief from stay ac	ctions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debte	or(s) in
	November 3, 2017	/s/ Paul W Owen	Jr		
	Date	Paul W Owen Jr			
		Signature of Attorne Paul W. Owen, Jr			
		PO Box 369	•		
		Orangeburg, SC 2	29116-0369		
		Name of law firm			_

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court District of South Carolina

In re	Kelli S. Anderson			Case No.	
		Debtor(s)	Chapter	13	

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

nform	ation to, the debtor's schedules, statements an	d lists which are being filed at this time or as they currently exist in draft
	Master mailing list of creditors submitted v	ia:
	(a) computer diskette	
	(b) scannable hard cop (number of sheets submitted	
	(c) X electronic version file	d via CM/ECF
Date:	November 3, 2017	/s/ Scottie Eugene Anderson
		Scottie Eugene Anderson
		Signature of Debtor
Date:	November 3, 2017	/s/ Kelli S. Anderson
		Kelli S. Anderson
		Signature of Debtor
Date:	November 3, 2017	/s/ Paul W Owen Jr
		Signature of Attorney
		Paul W Owen Jr
		Paul W. Owen, Jr.
		PO Box 369
		Orangeburg, SC 29116-0369
		Typed/Printed Name/Address/Telephone
		Fed ID No.: 5753
		District Court I.D. Number

BANK OF AMERICA VISA PO BOX 15026 WILMINGTON DE 19850-5026

BELK PO BOX 965029 ORLANDO FL 32896

CABELAS VISA PO BOX 3838 OMAHA NE 68103

CAPITAL ONE PO BOX 85617 RICHMOND VA 23276-0001

CHASE VISA PO BOX 15583 WILMINGTON DE 19886-1194

CITIMORTGAGE PO BOX 9438 GAITHERSBURG MD 20898-9438

DILLARD NATIONAL BANK PO BOX 52079 PHOENIX AZ 85072-2079

FIRST CITIZEN BANK PO BOX 29 COLUMBIA SC 29202-0029

HSBC CARD SERVICES PO BOX 80084 SALINAS CA 93912-0084

INTERNAL REVENUE SERVICE INSOLVENCY UNIT 1835 ASSEMBLY STREET, 6TH FLOOR COLUMBIA SC 29201

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA PA 19101-7346 JC PENNEY BANKRUPTCY DEPT MCCBG
PO BOX 103126
ROSWELL GA 30076

LCA COLLECTIONS
PO BOX 2240
BURLINGTON NC 27216

LOWES
PO BOX 981064
EL PASO TX 79998-1064

OLD NAVY 7840 RUSSELL ROAD ATLANTA GA 30350

SC HOUSING CORPORATION 300-C OUTLET POINT BLVD COLUMBIA SC 29210

SEARS MASTERCARD PO BOX 105486 ATLANTA GA 30348

SOUTH CAROLINA DEPT. OF REVENUE PO BOX 125 COLUMBIA SC 29211-0125